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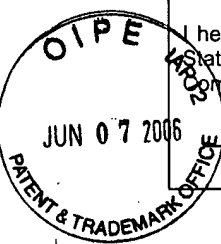
CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Julie Staszewski
Type or print name

Julie Staszewski
Signature

6/5/06
Date



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

ART UNIT: 1624

ATWAL, ET AL.

EXAMINER: RAO, D.

APPLICATION NO: 10/660,878

FILED: 09/12/2003

FOR: HETEROCYCLIC DIHYDROPYRIMIDINE COMPOUNDS

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

This Information Disclosure Statement is being filed in accordance with 37 C.F.R. §1.97(c).

In accordance with 37 C.F.R. §1.56, applicant wishes to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

Pursuant to the OG Notice of August 5, 2003 for U.S. national applications filed after June 30, 2003, the requirement for submitting a copy of each cited U.S. patent and each cited U.S. patent application publication is waived, copies of the U.S. patent and U.S. patent publications are not submitted. Copies of foreign patent documents and non-patent literature, if cited, are enclosed.

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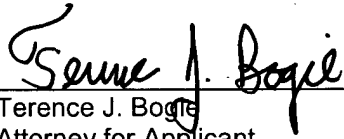
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The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s) and charge the appropriate fee under §1.17 (p) to Deposit Account 19-3880 in the name of Bristol-Myers Squibb Company.

Respectfully submitted,

Bristol-Myers Squibb Company
Patent Department
P.O. Box 4000
Princeton, NJ 08543-4000

Date: 6/5/06


Terence J. Bogie
Attorney for Applicant
Reg. No. 44,544
Phone: 609-252-6385

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant

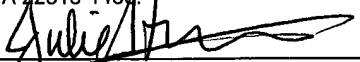


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FEE LETTER FOR SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT


Sir:

Please charge Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company in the amount of \$180 for payment of the fee pursuant to 37 CFR §1.17(p) for the submission of an Information Disclosure Statement under 37 CFR §1.97(c).

An additional copy of this paper is here enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 19-3880 in the name of Bristol-Myers Squibb Company.

Respectfully submitted,

Bristol-Myers Squibb Company
Patent Department
P.O. Box 4000
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Terence J. Bogie
Attorney for Applicant
Reg. No. 44,544
Phone: 609-252-6385
Date: 6/5/06